PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number 9823390 1370 1370 1370						
		CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		0	R		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			23					RATE	FE		1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.00		00 0	R	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			∂3minus 20=		• 3			X\$ 9=		0	1	X\$18=	54.00	
INDEPENDENT CLAIMS			ے minus 3 =		1			X40=		\Box_{\circ}	R	X80=	80.00	
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135:		7		.270-	3-	
• 16	the difference	in column 1 is	less than zero, enter "0" in c			olumn 2		TOTA		- °		+270=	844·2	
CLAIMS AS AMENDED - PART II									<u> </u>		* *	OTHER		
		(Column 1)		(Colui		(Column 3)	SMALL ENTITY			R.	SMALL			
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADD TION FEE	AL		RATE	ADDI- TIONAL FEE	
	Total	. 17	Minus	<i>2</i>	3	=//		X\$ 9=		0	R	X\$18=		
AME	Independent	· 4	Minus	•••	4			X40=		O	R	X80=		
<u></u>	PINST PRESE	JUIPLE DE	LTIPLE DEPENDENT'C				+135=		01	R	+270=			
								TOTA			R,	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADD TION FEE	AL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		Of	۱,	X\$18=		
	Independent	•	Minus	***		=	t	X40=	1	0	┪	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+	-10"	`			
								+135=		OF	3	+270=		
								TOTA ADDIT. FE		OF	₹ ,	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI TIONA FEE	۱L		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	Ī	X\$ 9=		OF	۱,	X\$18=		
	Independent	•	Minus	***		=	ŀ	X40=	1-	7	ł	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+	OF	'}			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OF	1	+270=		
" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OF	}	TOTAL ODIT. FEE		
		iber Previously Pai					r four	nd in the a	appropriate	box in e	colı	ımn 1.		